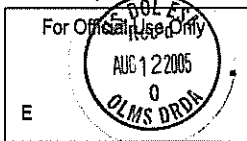


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>5968</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>JAMES</u> <u>A</u> <u>GROGAN</u> P.O. Box, Bldg., Room No., if any <u></u> Street <u>C/O 9602 MARTIN LUTHER KING HWY</u> City <u>LANHAM</u> State <u>Maryland</u> ZIP Code + 4 <u>20706-1839</u>	4. Name, file number, and address of labor organization. Name <u>ASBESTOS WORKERS AFL-CIO</u> Labor Organization File Number <u>000-090</u> P.O. Box, Building and Room Number, if any <u></u> Street <u>9602 MARTIN LUTHER KING HWY</u> City <u>LANHAM</u> State <u>Maryland</u> ZIP Code + 4 <u>20706-1839</u>
5. Position in labor organization. <u>GENERAL PRESIDENT</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u></u> Trade Name, if any: <u></u> P.O. Box, Bldg., Room No., if any <u></u> Street <u></u> City <u></u> State <u></u> ZIP Code + 4 <u></u>	7.a. Nature of Interest, Transaction, or Income. <u></u> 7.b. Amount. <u></u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed James A. Grogan On 8/10/2005 301-731-9101
Date Telephone Number

Name of Person Filing JAMES GROGAN

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name KELLY PRESS

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1701 CABIN BRANCH DRIVE

City CHEVERLY

State Maryland

ZIP Code + 4 20785

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

UNION PRINTER OF PERIODICALS AND RELATED MATERIALS

11.b. Approximate dollar value of such dealing.

\$127,794

12.a. Nature of interest held or income received.

PERSONAL DINNER PAID BY VENDOR

12.b. Amount.

\$500

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐or Consultant ☐

?

14.b. Amount of payment.

Name of Person Filing JAMES GROGAN

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name PALM SPRINGS RIVERA

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City PALM SPRINGS

State California

ZIP Code + 4

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

HOTEL USED IN WESTERN CONFERENCE MEETINGS

11.b. Approximate dollar value of such dealing.

\$10,000

12.a. Nature of interest held or income received.

GIFT BASKET (WINE& CHEESE),

12.b. Amount.

\$65

Name of Person Filing JAMES GROGAN

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name OPUS INVESTMENT ADVISORS, LLC

Trade Name, if any:

P.O. Box, Bldg., Room No., if any SUITE 3230

Street 2321 ROSECRANS AVE

City EL SEGUNDO

State California

ZIP Code + 4 90245

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

NO BUSINESS RELATIONSHIP

11.b. Approximate dollar value of such dealing.

\$0

12.a. Nature of interest held or income received.

HOLIDAY WINE GIFT

12.b. Amount.

\$122

Name of Person Filing JAMES GROGAN

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name KELLY PRESS

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1701 CABIN BRANCH DRIVE

City CHEVERLY

State Maryland

ZIP Code + 4 20785

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

UNION PRINTER OF MAGAZINE AND RELATED MATERIALS

11.b. Approximate dollar value of such dealing.

\$127,794

12.a. Nature of interest held or income received.

VENDOR GIFT OF CHRISTMASS HAM AND CANDIES

12.b. Amount.

\$116

Name of Person Filing JAMES GROGAN

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name PALM SPRINGS RIVERA

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1600 N INDIAN CANYON DR

City PALM SPRINGS

State California

ZIP Code + 4 92262

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

HOTEL USED IN WESTERN COUNCIL MEETINGS

11.b. Approximate dollar value of such dealing.

\$10,000

12.a. Nature of interest held or income received.

ROUND OF GOLF

12.b. Amount.

\$65

Name of Person Filing JAMES GROGAN

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name PALM SPRINGS RIVERA

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City PALM SPRINGS

State California

ZIP Code + 4

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

HOTEL USED IN WESTERN STATES COUNCIL MEETINGS

11.b. Approximate dollar value of such dealing.

\$10,000

12.a. Nature of interest held or income received.

CHRISTMASS HAM

12.b. Amount.

\$67